Program Summary Department of Health Services Sexually Violent Persons

Program Overview

The Sexually Violent Persons (SVP) Program is administered by the Department of Health Services (DHS) and the Arizona State Hospital (ASH). A SVP is defined as a person that has been found guilty of a sexually violent offense, and has a mental disorder that makes that individual likely to reoffend. The program was established by statute in FY 1997 but did not immediately become operational due to concerns of the constitutionality of the program. The United States Supreme Court found a similar program in Kansas to be constitutional, and in September of 1996, ASH accepted its first patients for treatment.

An inmate convicted of a sexually violent offense is required to receive a psychological screening near the end of their sentence in order to determine if that individual may be classified as a SVP. If the screening raises concerns that an individual may in fact be a SVP, the county attorney may file a petition alleging probable cause. A trial must be held within 120 days of the filing to ascertain whether or not the individual is indeed a SVP. The inmate, while awaiting the probable cause hearing, remains at the ASH SVP unit but does not receive treatment.

If the judge or jury determines that an individual is a SVP, they either remain at the SVP unit, are moved to a less-restrictive alternative on the ASH grounds or are integrated into the community.

Once at the SVP unit, the individual receives an evaluation and a treatment plan is developed. Counselors work with patients to help them to recognize and change their behavior. Annually, a SVP may petition the court to be released from the program or to be moved to a less restrictive setting. At a discharge hearing, the state must prove that the individual's condition has not changed and that they are still a threat to the public.

SVPs advance through treatment programs depending on their progress. Annual evaluations and quarterly reports are submitted to the courts on all residents. Patients in the program generally fall into 3 categories: pretrial detainees; residents in full confinement; and Residents in Intensive Community Treatment, Surveillance and Reintegration Program, also referred to as the Less Restrictive Alternative (LRA) Program.

In the LRA Program, individuals are integrated into the community in stages. The integration process involves:

- Going on staff-accompanied, GPS-monitored outings
- Finding community sponsors
- Disclosing past offenses
- Attending substance abuse programs
- Job searches and interviews
- Periodic drug screens and psycho-sexual status polygraphs

There are 6 levels of LRA residents, with Level 6 individuals living in the least restrictive setting, community based housing.

The mix of clients in the SVP Program between those residents in full confinement to those in the less restrictive alternative has changed over time. *Table 1* below highlights the shift.

Table 1 Census History for SVPs by Fiscal Year							
	<u>2001</u>	2002	2003	2004	<u>2005</u>		
Pretrial	64	50	42	30	13		
Detainees Full Confinement	48	46	43	32	20		
LRA	<u>23</u>	<u>33</u>	<u>35</u>	<u>55</u>	<u>67</u>		
Total	135	129	120	117	100		

As seen by the chart, the number of individuals assigned to the LRA Program has increased, from 17% of the total population in FY 2001 to 62% in FY 2005.

Program Funding

The SVP Program is entirely funded from the General Fund. In FY 2006, the program received \$10.3 million in funding. This is an increase of \$297,300 from FY 2005 for statewide adjustments. The FY 2006 level of funding represents a 14.5% increase from FY 2001 levels. *Table 2* displays historical funding information for the SVP Program using data from FY 2001, FY 2005 and FY 2006.

Table 2 SVP Program – Funding History						
Fund	FY 2001	FY 2005	FY 2006			
GF	\$8,988,900	\$9,999,100	\$10,296,400			

The agency reports that \$100,000 will be reverted to the General Fund in FY 2005. In addition, 10 security positions from the SVP unit and their associated funding (\$291,300) were moved to the Absent Without Leave Prevention Plan which began in August 2004. These positions were utilized to provide around the clock perimeter surveillance of both the civil and forensic campuses. The shifting of these positions leaves 21 officers assigned to the SVP Program. A formal request of this transfer will be made in the agency's FY 2007 budget request.

The department further reports that although the overall census is declining, there is an increase in the residents that require intensive treatment, resulting in the average cost of care of residents increasing.

Performance Measures

The only performance measure used to assess the effectiveness of the SVP program is the SVP Program Year-End Census. This measure merely tracks the number of individuals participating in the SVP Program at the end of each fiscal year.

Clearly there needs to be measures assessing the effectiveness of the LRA Program in integrating clients into the community. Measures could include:

- Re-offender rates
- Percent of LRA participants complying with the terms and conditions of LRA agreements
- Percent of LRA participants with full-time jobs
- Job retention of participants
- Average number of drug screens/psycho-sexual status polygraphs per client
- Percent of LRAs failing drug tests/psycho-sexual status polygraphs
- Number of LRAs living in community based housing